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PTO/SB/05 (03-01)
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 3255
First Inventor Sarah Nicole Coty
Title HANDLE COVER PROMOTION SYSTEM AND METHOD
Express Mail Label No. EV 338372163 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 10]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 4]
5. Oath or Declaration [Total Pages]
 - a. ☒ Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
 - b. ☐ (for continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: Additional Postcard

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____

Prior application information:

Examiner _____

Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

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or ☒ Correspondence address below

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Name (Print/Type)	Mark E. Brown	Registration No. (Attorney/Agent)	30,361
Signature	Mark Brown		Date 8/5/03

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Mark E. Brown, P.O. Reg. No. 30,361

22151 U.S. PTO
10/634502
08/05/03

FEE TRANSMITTAL for FY 2003 <i>Effective 01/01/2003. Patent fees are subject to annual revision.</i>		Complete if Known	
		Application Number	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	08/05/2003
		First Named Inventor	Sarah Nicole Coty
		Examiner Name	
TOTAL AMOUNT OF PAYMENT		Art Unit	
(\$) 375.00		Attorney Docket No.	3255

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																													
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES																													
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 03-1425 Deposit Account Name: Chase & Yakimo		Large Entity Small Entity																													
The Commissioner is authorized to: (check all that apply)																															
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments																															
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FEE CALCULATION																															
1. BASIC FILING FEE																															
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																															
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**or number previously paid, if greater; For Reissues, see above																															
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SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	Mark E. Brown	Registration No. (Attorney/Agent)	30,361
Signature	Mark E. Brown	Telephone	913-339-9666
		Date	8/5/03

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